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Cynthia M. Pedigo 1900 FIFTEENTH STREET (Depositor's name) BOULDER CO 80302 Cignature) **EXAMINER AND GROUP ART UNIT** DATE MAILED FILING DATE **TOTAL CLAIMS** APPLICATION NO. 2855 07/18/0 018 PATEL, H 09/163,529 09/30/98 First Named 35 USC 154(b) term ext. 0 Days. DUTTON, Applicant TITLE OF CORRECTION OF CORIOLIS FLOWMETER MEASUREMENTS DUE TO MULTIPHASE FLOWS INVENTION FEE DUE DATE DUE BATCH NO. APPLN. TYPE SMALL ENTITY CLASS-SUBCLASS ATTY'S DOCKET NO. NO \$1240.00 10/18/01 **J38** UTILITY 3 7003/036 073-861.356 2. For printing on the patent front page, list Chrisman, Bynum & Change of correspondence address or Indication of "Fee Address" (37 CFR 1.363). (1) the names of up to 3 registered patent Use of PTO form(s) and Customer Number are recommended, but not required. Johnson P.C. attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. and the names of up to 2 registered patent □ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47) attached. attorneys or agents. if no name is listed, no name will be printed. 4a. The following fees are enclosed (make check payable to Commissioner 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. of Patents and Trademarks) Inclusion of assignee data is only appropriate when an assignment has been previously submitted to Issue Fee the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for 10 Advance Order - # of Copies_ filing an assignment. (A) NAME OF ASSIGNEE 4b. The following fees or deficiency in these fees should be charged to: Micro Motion, Inc. DEPOSIT ACCOUNT NUMBER 03-1725 (B) RESIDENCE: (CITY & STATE OR COUNTRY Boulder, Colorado (ENCLOSE AN EXTRA COPY OF THIS FORM) Please check the appropriate assignee category indicated below (will not be printed on the patent) ssue Fee Advance Order - # of Copies __ Individual The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application Identified above. (Authorized Signature) Reg. No. 46,566 - 9-01 Brett L. Bornsen er they the applicant; a registered attorney NOTE: The Issue Fee will not be accepted from anyone of or agent; or the assignee or other party in interest as shown the records of the Patent and Trademark Office. 10/16/2001 MBERHE1 00000194 09163529 Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Tima will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief information Officer, Patant and Trademark 1280.00 OP Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS 30.00 pp ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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